Medi-Cal
EDI
Update
2004

Electronic Data Interchange: EDI Strategy 2004 and Beyond

EDI Update 2004 Agenda

- HIPAA Migration Process
- Available HIPAA Transactions
- Upcoming Transactions
- Interim Code Conversions
- Implementation Schedules
- EDI Technical Assistance
- Progress on Other HIPAA Regulations

Purpose

The purpose of today's presentation is to update our trading partners regarding Medi-Cal's Electronic Data Interchange (EDI) Strategy for 2004 and beyond. Our EDI growth is centered around Health Insurance Portability and Accountability Act (HIPAA) regulation implementation and transition.

HIPAA Migration Process

Our goal is to ensure continuation of payments to providers and services to beneficiaries as we transition to HIPAA compliance.

- Phased Approach Rationale
- Contingency Plan Operation
- EDI Enhancements are Tied to HIPAA

Medi-Cal Fee For Service:

- Health Care Claims (ASC X12N 837)
 - Professional 004010X098A1
 - Real-Time Direct Data Entry (DDE), Medical
 - Batch
 - Institutional 004010X096A1
 - Batch
- Migration in Process

Medi-Cal Fee For Service (cont.):

- Pharmacy Claims Standard
 - NCPDP 5.1 Real-Time
 - NCPDP 5.1 Real-Time DDE
 - 5.1 includes Compound Drug Segment
 - NCPDP 1.1 Batch
- Migration complete

Medi-Cal Fee For Service (cont.):

- Remittance Advice for All Claim Types
 - ASC X12N 835 Version 4010A1

- Eligibility Inquiry and Response
 - ASC X12N 270/271 Version 4010A1
 - Real-Time DDE

Medi-Cal Fee For Service (cont.):

- Claims Status Inquiry and Response
 - ASC X12N 276/277 Version 4010A1
 - Real-Time DDE



Denti-Cal Fee For Service:

- Health Care Claims (ASC X12N 837)
 - ASC X12N 837 Version 4010A1

- Claims Status Inquiry and Response
 - ASC X12N 276/277 Version 4010A1

Short Doyle Medi-Cal:

- Health Care Claims (ASC X12N 837)
 - Institutional and Professional
- Remittance Advice for All Claim Types
 - ASC X12N 835 Version 4010A1

Medi-Cal Fee For Service: Nov. 20, 2004

- Eligibility Inquiry and Response
 - ASC X12N 270/271 Version 4010A1
 - Real-Time Leaseline and ISC
 - ASC X12N 864 Standard Transaction
 - ASC X12N 270/271 Standard Transaction
 - Spend Down (Share of Cost [SOC])
 - Medi-Reservation

Medi-Cal Fee For Service: April 18, 2005

- Eligibility Inquiry and Response
 - ASC X12N 270/271 Version 4010A1
 - Batch Transaction

Medi-Cal Fee For Service: Summer 2005

- Claims Status Inquiry and Response
 - ASC X12N 276/277 Version 4010A1
 - Batch Transaction
- NCPDP Prior Authorization (PA)
- Linking Paper Attachments to EDI Claims
 - Available only for Version 4010A1 Claims
- Coordination of Benefits (COB)

Medi-Cal Fee For Service: TBD

- Health Care Authorization Referral
 - ASC X12N 278 Version 4010A1
- Enhanced Transaction Functionality
 - ASC X12N 837 Health Care Claim
 - Increased Line Limits
 - Claim Replacement (Adjustments)

Denti-Cal Fee For Service: Oct. 27, 2004

- Remittance Advice for All Claim Types
 - ASC X12N 835 Version 4010A1

Denti-Cal Fee For Service: TBD

- Health Care Authorization Referral
 - ASC X12N 278 Version 4010A1

Other Program Transactions: Dec. 2004

- Managed Care Plan Enrollment
 - ASC X12N 834 Version 4010A1
- Managed Care Plan Premium Payment
 - ASC X12N 820 Version 4010A1
- Third Party Liability One-Way File Match



Other Program Transactions: TBD

- Short Doyle Medi-Cal Claim Status Inquiry and Response
 - ASC X12N 276/277 Version 4010A1

Interim Code Conversions

The Department of Health Services (DHS) interim code conversion efforts continue utilizing a phased approach.

- 25% of local codes converted Sept. 2003
- LA county codes converted Feb. 2004
- Acupuncture codes converted Oct. 20004
- DME codes will be converted Nov. 2004



Interim Code Conversions

DHS recently received approval from the federal Centers for Medicare and Medicaid (CMS) to pilot the Universal Product Number (UPN) for medical supplies.

- Multi-year project
- Addresses approximately 50% of remaining interim codes

Interim Code Conversions

DHS is currently in the process of planning for the next set of code conversions to be implemented in calendar year 2005.

- Status available on the Transactions and Code Sets section of the DHS Web site
 - www.dhs.ca.gov/hipaa

Implementation Schedules

Included in your packet are three implementation schedules:

- Medi-Cal Fiscal Intermediary (EDS)
- Dental Fiscal Intermediary (Delta Dental)
- Non-Fiscal Intermediary Projects

Implementation Schedules

- Schedules are posted to the DHS Web site
- Each transaction is listed with estimated completion dates for:
 - Gap analysis
 - Remediation
 - Testing
 - Implementation
 - Transition

- Conference Booth
 - Staff onsite to answer provider/submitter specific questions
- Webcast
 - View Medi-Cal's technical assistance webcast archive for the following transactions:
 - ASC X12N 270/271
 - ASC X12N 276/277
 - ASC X12N 837

Web site resources include:

- The Department of Health Services Medi-Cal Web site www.medi-cal.ca.gov
- The Department of Health Services Web site <u>www.dhs.ca.gov/hipaa</u>

Web site resources for Short Doyle Medi-Cal include:

- The Department of Mental Health site www.dmh.ca.gov/hipaa/tcs.asp#TechList
- The Department of Alcohol and Drug Programs site <u>www.adp.ca.gov/hp/hipaa.shtml</u>

Telephone support services include:

- Medi-Cal Telephone Service Support Center (TSC):
 - In State: 800-541-5555 (consolidated services)
 - Out of State Access: 916-636-1100 (CMC)
 - Out of State Access: 916-636-1200 (POS)
- Denti-Cal Provider Support:
 - In State: 800-423-0507
 - Out of State Access: 916-853-7373

Telephone support services include:

- Short Doyle Medi-Cal Provider Support
 - Department of Mental Health:
 - 916-653-0736
 - Department of Alcohol and Drug Programs:
 - 916-327-7471
- Managed Care Plan Support
 - Contact your contract administrator

Progress on Other HIPAA Rules

Security

- Centralizing security policies, standards and guidelines
- Documenting and/or establishing formal practices to manage the execution of security measures
- Enhancing physical and technical security safeguards
 - Medi-Cal Web site Transaction Services IDs and passwords

Progress on Other HIPAA Rules

- National Provider Identifier (NPI)
 - Project planning efforts have begun
 - Strategizing on assessment phase
 - Awaiting further scope definition from CMS, including enumeration methodology and database access

Progress on Other HIPAA Rules

Privacy

- Centralizing privacy policies, standards and guidelines
- Formalizing procedures and protocols to ensure adherence to the standard
- Coordination with the Security regulation requirements





Disclaimer

- This presentation module was created by Department of Health Services (DHS) and EDS, the fiscal intermediary for the CA Medicaid (Medi-Cal) program, in September 2004. Any questions regarding the module material should be directed to DHS or EDS Medi-Cal for resolution.
- The information contained in this presentation is intended to serve as a communication tool for the Medi-Cal provider, electronic submitter, vendor and clearinghouse communities. Every effort has been made to ensure the accuracy and completeness of this electronic resource document. This presentation material is time sensitive and contains information relative to DHS Medi-Cal's Health Insurance Portability and Accountability Act (HIPAA) implementation.
- EDS and DHS Medi-Cal cannot endorse, or appear to endorse, derivative or excerpted materials, and it cannot be held liable for the content or use of adapted products that are incorporated into other documents or web sites. Any adaptations of this electronic resource document must include a disclaimer to this effect. Advertising or implied endorsement for any commercial products or services is strictly prohibited.